## BEST AVAILABLE COPY

Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

CLAIMS AS FILED - PART					- 6			SMALL ENTITY			OTHER THAN		
TOTAL OL 1970			(Column 1)		(Column 2)		TYP	TYPE		OR	SMALL	ENTITY	
TOTAL CLAIMS			42				R	ATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BAS	IC FEE	370.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS			42 minus 20=		*		×	\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			/ 2 minus 3 =		*		×	42=		OR	X84=		
MULTIPLE DEPENDENT CLAIM PRESENT							+1	40=		OR	+280=		
* If the difference in column 1 is less than zero, enter					r "0" in c	column 2	TC	TAL		OR	TOTAL		
CLAIMS AS AMENDED - PART						•					OTHER	THAN	
		(Column 1)		(Colu		(Column 3)	SM	IALL I	ENTITY	OR	SMALL	ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	. **		=	X	9=	<u>.                                    </u>	OR	X\$18=		
	Independent	*	Minus	***		=	X	42=		OR	X84=		
	FIRST PRESE	NTATION OF MU	JLTIPLE DEI	PENDEN	CLAIM		+1	40=.		OR	+280=		
			a					TOTAL		<b>∩</b> P	TOTAL		
		(Calumn 2)	ADDI	T. FEE		JOI 1	ADDIT. FEE						
		(Column 1) CLAIMS	military positive	(Colur		(Column 3)			ADDI-			ADDI-	
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVIO PAID	DUSLY	PRESENT EXTRA	R/	ATE	TIONAL FEE		RATE	TIONAL FEE	
	Total	*	Minus	**		=	X	9=		OR	X\$18=		
	Independent	*	Minus	***		=	X	42=		OR	X84=		
	FIRST PRESE	NTATION OF MU	JLTIPLE DEI	PENDEN	CLAIM		+1	40=		OR	+280=		
<u>L</u>								TOTAL			TOTAL		
										OR	ADDIT. FEE		
_		(Column 1)		(Colu	mn 2) IEST	(Column 3)							
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	BER OUSLY FOR	PRESENT EXTRA	R/	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X	9=	`	OR	X\$18=		
	Independent	*	Minus	***		=	X	42=		OR	X84=		
Ľ	FIRST PRESENTATION OF MULTIPLE DEPEND				T CLAIM		J						
+140= +140=										OR	+280=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  TOTAL ADDIT. FEE  ADDIT. FEE													
	Th *Highest Nur	nber Previously Pa	id For" (Total o	r Independ	lent) is the	e highest numbe	er found in	the ap	propriate bo	x in co	lumn 1.		